

MISSOURI DEPARTMENT OF NATURAL RESOURCES AIR POLLUTION CONTROL PROGRAM EMISSIONS INVENTORY QUESTIONNAIRE, OR EIQ FORM 3.0 PART 70 OPERATING PERMIT EMISSIONS FEE CALCULATION

FACILITY NAME	1 011111 010		FIPS COUNTY NO	D.		PLANT NO.		YEAR OF DATA		
1. EMISSION UNIT	more than on	e page is ne	eded, use the	e first row of	the duplicate	d page to list		total box at the als from this pa		the column. If
NO.	Express figures in tons per year and round to two decimal places. AIR POLLUTANT PM ₁₀ FIL SO _X NO _X VOC CO LEAD HAPs PM _{2.5} FIL NH ₃ PM 0									
300										
	1 10110 1 12	σοχ	Νοχ	700		LLAD	IIAFS	1 M2.5 1 IL	Nig	PM CON
PAGE TOTALS										
Note: Fill out t										
2. ACTUAL EN								ow.) PM _{2.5} TOTAL	NILL	DM CON
Total	PM ₁₀ TOTAL	SO _x	NO _x	voc	СО	LEAD	HAPs	FWI2.5 TOTAL	NH ₃	PM CON Included in Total PM ₁₀ and PM _{2.5}
Copy the actua			to the appro	priate box(es	i) in the Total	Plant Emissi	ons Section	of		1 W ₁₀ and 1 W _{2.5}
Form 1.0 Gene 3. CHARGEAB			1 4 000 Tons	/Vr can ner	nollutant)					
Total	EL EIMIGGIGI	(Waxiiiiaii	14,000 10113	711. Cap pci	NO FEES FOR CO			NO FEES FOR PM _{2.5}	NO FEES FOR NH3	PM CON is included in PM ₁₀ and PM _{2.5}
4. SUM OF CH										
Round chargea tonnage is one					um emission					
5. TOTAL ANN										
Multiply the sur enter this amou					1 by \$40 and	\$				
6. ANNUAL EN	IISSIONS FEI	E REMITTED		TY OF KANS	SAS CITY OF					
CHECK NUMBER			CHECK DATE			AMOUNT REMITTED IN CALENDAR YEAR OF RECORD				
7. ANNUAL EN	IISSIONS FEI	E REMITTED		ATE (SECT	ION 5 MINUS					
CHECK NUMBER			CHECK DATE CHECK AMOUNT \$							
8. INCLUDE A	CHECK FOR	THE AMOU	NT IN SECTI	ON 7, PAYA	BLE TO THE	MISSOURI	AIR POLLU	TION CONTRO	DL PROGR <i>A</i>	AM.
Mail the check										
9. SEND THE (FORM 1.0 GE	NERAL PLAN	IT INFORMA	TION.							
Facilities within local air program jurisdiction only need to include copies of Form 1.0 General Plant Information, Form 3.0 Emissions Fee Calculation and Form 4.0 Financial Cost Estimate with the emissions fee check.										